PILLAR
FINANCIAL GROUP

# RETIREMENT TOOLKIT

## YOUR INCOME PLANNING BOOKLET

Name ______________________________

______________________________

Date ______________________________

- Use this simple worksheet to get started on your retirement income plan.
- Your advisor can then help you create a realistic retirement income plan to help ensure that your income lasts as long as your retirement.
- Upon completion, scan and email to info@pillarcentral.com, fax to 559.436.0205.

# ESTIMATE YOUR ANTICIPATED RETIREMENT EXPENSES

Envision your life in retirement and think about the expenses you will — or might — incur. Taking into account your lifestyle and goals, identify which expenses are essential (must have) to differentiate them from those that are discretionary (nice to have).

| Record your estimated monthly retirement expenses and indicate whether it is essential and if it will vary. | | AMOUNT ($) YOU | AMOUNT ($) SPOUSE | IS IT ESSENTIAL? YES | WILL IT VARY? YES | NOTES |
|---|---|---|---|---|---|---|
| Housing | Homeowner's Insurance | $ | $ | ☐ | ☐ | |
| | Household Improvements & Maintenance | $ | $ | ☐ | ☐ | |
| | Mortgage | $ | $ | ☐ | ☐ | |
| | Property Tax | $ | $ | ☐ | ☐ | |
| | Property Tax Rent/Condo Fees | $ | $ | ☐ | ☐ | |
| | Other | $ | $ | ☐ | ☐ | |
| Utilities | Electric | $ | $ | ☐ | ☐ | |
| | Oil/Gas | $ | $ | ☐ | ☐ | |
| | Phone/Cable/Internet Fees | $ | $ | ☐ | ☐ | |
| | Water/ Sewer | $ | $ | ☐ | ☐ | |
| | Other | $ | $ | ☐ | ☐ | |
| Personal | Clothing | $ | $ | ☐ | ☐ | |
| | Groceries | $ | $ | ☐ | ☐ | |
| | Laundry/Dry Cleaning | $ | $ | ☐ | ☐ | |
| | Personal Care (health & beauty) | $ | $ | ☐ | ☐ | |
| | Other | $ | $ | ☐ | ☐ | |
| Health Care & Insurance | Dental, Vision, Hearing | $ | $ | ☐ | ☐ | |
| | Medical Insurance Medicare | $ | $ | ☐ | ☐ | |
| | Premiums & Expenses Medicare | $ | $ | ☐ | ☐ | |
| | Supplemental Premiums | $ | $ | ☐ | ☐ | |
| | Other (e.g., Out-of-Pocket Pharmacy Costs) | $ | $ | ☐ | ☐ | |
| | Long-Term Care Insurance | $ | $ | ☐ | ☐ | |
| | Premiums Disability Insurance | $ | $ | ☐ | ☐ | |
| | Life Insurance Premiums | $ | $ | ☐ | ☐ | |
| **SUBTOTAL** | | $ | $ | | | |

# ESTIMATE YOUR ANTICIPATED RETIREMENT EXPENSES (cont.)

| Record your estimated monthly retirement expenses and indicate whether it is essential and if it will vary. | | AMOUNT YOU | AMOUNT SPOUSE | IS IT ESSENTIAL? YES | WILL IT VARY? YES | NOTES |
|---|---|---|---|---|---|---|
| Family Care | Support of Children/Grandchildren | $ | $ | ☐ | ☐ | |
| | Support of Parents | $ | $ | ☐ | ☐ | |
| | Other Obligations | $ | $ | ☐ | ☐ | |
| Routine Transportation | Auto Loan/Lease Payments | $ | $ | ☐ | ☐ | |
| | Excise Tax/Registration Fees | $ | $ | ☐ | ☐ | |
| | Gasoline | $ | $ | ☐ | ☐ | |
| | Auto Insurance | $ | $ | ☐ | ☐ | |
| | Routine Maintenance | $ | $ | ☐ | ☐ | |
| | Other Commuting Expenses | $ | $ | ☐ | ☐ | |
| Recreation | Club Memberships | $ | $ | ☐ | ☐ | |
| | Hobbies | $ | $ | ☐ | ☐ | |
| | Travel & Vacations | $ | $ | ☐ | ☐ | |
| | Other | $ | $ | ☐ | ☐ | |
| Entertainment | Dining Out | $ | $ | ☐ | ☐ | |
| | Movies/Theater/Sporting Events | $ | $ | ☐ | ☐ | |
| | Other | $ | $ | ☐ | ☐ | |
| Charitable Donations And Gifts | Charitable Donations | $ | $ | ☐ | ☐ | |
| | Gifts | $ | $ | ☐ | ☐ | |
| Custom Expenses | Expense #1 | $ | $ | ☐ | ☐ | |
| | Expense #2 | $ | $ | ☐ | ☐ | |
| | Expense #3 | $ | $ | ☐ | ☐ | |
| | Expense #4 | $ | $ | ☐ | ☐ | |
| | Expense #5 | $ | $ | ☐ | ☐ | |
| | Expense #6 | $ | $ | ☐ | ☐ | |
| | **SUBTOTAL** | **$** | **$** | | | |
| | **SUBTOTAL From Page 3** | **$** | **$** | | | |
| | **TOTAL** | **$** | **$** | | | |

# TAKE INVENTORY OF INCOME AND ASSETS

List the income sources you will use to fund your retirement, as well as any assets and accounts you may have that could be converted into income.

| INCOME | DESCRIPTION OF SOURCE OF INCOME | MONTHLY INCOME YOU | SPOUSE |
|---|---|---|---|
| Annual Income | | $ | $ |
| Social Security | | $ | $ |
| Pension Plans | | $ | $ |
| Annuity Income | | $ | $ |
| Rental Income | | $ | $ |
| Other | | $ | $ |
| | TOTAL | $ | $ |

| ASSETS | DESCRIPTION OF ASSETS | INVESTED ASSETS YOU | SPOUSE |
|---|---|---|---|
| Employer-Sponsored Savings | | $ | $ |
| Traditional IRAs | | $ | $ |
| Taxable Mutual Funds | | $ | $ |
| Tax-Deferred Annuities | | $ | $ |
| Savings Accounts | | $ | $ |
| Other | | $ | $ |
| | TOTAL | $ | $ |

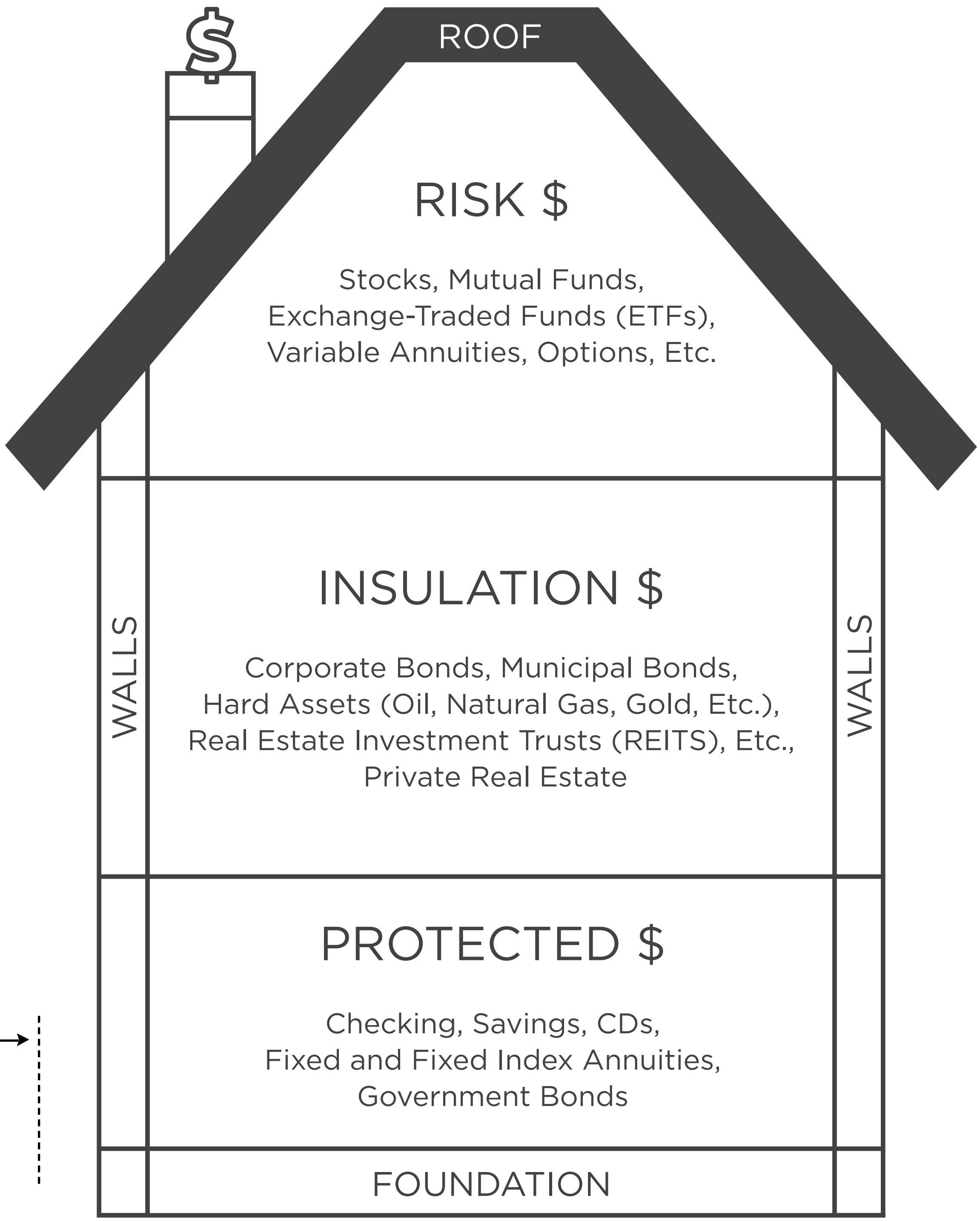
| OTHER INCOME | DESCRIPTION OF INCOME | OTHER INCOME YOU | SPOUSE |
|---|---|---|---|
| Real Estate | | $ | $ |
| Inheritance | | $ | $ |
| Stock Options | | $ | $ |
| Other | | $ | $ |
| | TOTAL | $ | $ |

The asset values provided herein have been obtained from the above named individual(s) or statements provided by the client. **Osaic Wealth, Inc.** has not independently verified the values.

# YOUR FISCAL HOUSE

Building a reliable retirement income plan is a lot like building a home: Its strength depends on how well its components — the roof, walls and foundation — work together as one.

Here are the parts that generally go into each section of your fiscal house:



7110 N Fresno St., Suite 120
Fresno, CA 93720

559.436.6441
www.pillarcentral.com